

# **APPENDIX 2A** **10' WIDE MANUFACTURED HOME**

## **TRANSPORTATION PERMIT** **CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th align="center" colspan="2">PERMIT VALID BETWEEN</th> </tr> <tr> <td style="width:50%;">Sunrise</td> <td align="center">/ /</td> </tr> <tr> <td>PM</td> <td align="center">/ /</td> </tr> <tr> <td>AND SUNSET</td> <td align="center">/ /</td> </tr> <tr> <td>MOVING AUTHORIZED</td> <td align="center">YES NO</td> </tr> <tr> <td>SATURDAY</td> <td align="center"><input type="checkbox"/> <input checked="" type="checkbox"/></td> </tr> <tr> <td>SUNDAY</td> <td align="center"><input type="checkbox"/> <input checked="" type="checkbox"/></td> </tr> <tr> <td>SUNSET TO SUNRISE</td> <td align="center"><input type="checkbox"/> <input checked="" type="checkbox"/></td> </tr> </table>		PERMIT VALID BETWEEN		Sunrise	/ /	PM	/ /	AND SUNSET	/ /	MOVING AUTHORIZED	YES NO	SATURDAY	<input type="checkbox"/> <input checked="" type="checkbox"/>	SUNDAY	<input type="checkbox"/> <input checked="" type="checkbox"/>	SUNSET TO SUNRISE	<input type="checkbox"/> <input checked="" type="checkbox"/>
PERMIT VALID BETWEEN																			
Sunrise	/ /																		
PM	/ /																		
AND SUNSET	/ /																		
MOVING AUTHORIZED	YES NO																		
SATURDAY	<input type="checkbox"/> <input checked="" type="checkbox"/>																		
SUNDAY	<input type="checkbox"/> <input checked="" type="checkbox"/>																		
SUNSET TO SUNRISE	<input type="checkbox"/> <input checked="" type="checkbox"/>																		
HCD. NO. <b>Required</b>		<div align="right">2a</div> <div>10'0" Wide Mfd.</div> <div>Home</div> <div align="right">AUTHORIZED STATE REPRESENTATIVE</div>																	
<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input checked="" type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. A "Manufactured Home" as defined in Section 387 of the California Vehicle Code Maximum Width--10'0", Maximum Length--80'0" TYPE VEHICLE Legal, with dual rear wheels and an unladen weight as defined in Sec. 660 of CVC of not less than 6,500 lbs. KING PIN TO LAST AXLE Variable COMB. VEHICLE LENGTH 105'0"																	
		TELECOPIED PERMITS NOT VALID WITHOUT SEAL.  <div align="center">N/A</div>																	
		SENDING STATION N/A RECEIVING STATION N/A																	
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED																			
MAX HEIGHT: 14'0"		MAX WIDTH: 10'0"																	
MAX OVERALL LENGTH: 105'0"		MAX OVERHANG: Legal																	
AXLE NUMBER	1	3	4																
NUMBER TIRES																			
AXLE SPACING																			
AXLE WIDTH																			
Towed Unit--Variable																			
WEIGHT		Power Unit--Legal Towed Unit--6,000 lbs./ axle																	
ORIGIN N/A		DESTINATION N/A																	
AUTHORIZED STATE HIGHWAYS		COUNTY AND/OR CITY PERMITS REQUIRED.																	
Except for the routes listed on the attached "Prohibited State Routes" list, moves authorized by this permit may travel on all State Highways and overcrossings on those highways.																			
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED When required by the attached "Pilot Car Requirements" list, moves authorized by this permit shall be accompanied by a pilot car		ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Prohibited State <input type="checkbox"/> Routes and Pilot <input type="checkbox"/> Car Requirements <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																	
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE. <input type="checkbox"/> EXEMPT \$ 70.00		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME. <div align="center">           AUTHORIZED AGENT SIGNATURE _____ DATE / /         </div>																	

# **APPENDIX 2B** **12' WIDE MANUFACTURED HOME**

## **TRANSPORTATION PERMIT** CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____		<b>PERMIT VALID BETWEEN</b> Sunrise <u>   </u> / <u>   </u> / <u>   </u> PM AND SUNSET <u>   </u> / <u>   </u> / <u>   </u> MOVING AUTHORIZED YES NO SATURDAY <input type="checkbox"/> <input checked="" type="checkbox"/> SUNDAY <input type="checkbox"/> <input checked="" type="checkbox"/> SUNSET TO SUNRISE <input type="checkbox"/> <input checked="" type="checkbox"/>	
HCD. NO. <b>Required</b>		2b <b>12'0" Wide Mfd.</b> <b>Home</b> AUTHORIZED STATE REPRESENTATIVE _____	
<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input checked="" type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. <b>A "Manufactured Home" as defined in Section 387 of the California Vehicle Code</b> <b>Maximum Width--12'0", Maximum Length--80'0"</b>	
TYPE VEHICLE <b>Legal, with dual rear wheels and an unladen weight as defined in Sec 660 CVC of not less than 6,500 lbs.</b>		TELECOPIED PERMITS NOT VALID WITHOUT SEAL <div style="text-align: center; font-size: 2em;">N/A</div>	
KING PIN TO LAST AXLE <b>Variable</b>		COMB. VEHICLE LENGTH <b>105'0"</b>	
SENDING STATION <b>N/A</b>		RECEIVING STATION <b>N/A</b>	
<b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b>			
MAX HEIGHT: <b>14'0"</b>		MAX WIDTH: <b>12'0"</b>	
MAX OVERALL LENGTH: <b>105'0"</b>		MAX OVERHANG: <b>Legal</b>	
AXLE NUMBER	1	2	3
NUMBER TIRES			
AXLE SPACING			
AXLE WIDTH			
WEIGHT	<b>Power Unit--Legal</b>		
ORIGIN	<b>N/A</b>		
DESTINATION	<b>N/A</b>		
TRIPS	<b>Unlimited</b>		
AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED.			
Except for the prohibitions listed on the attached Pink Sheet, moves			
authorized by this permit may travel on State Highways and overcrossings of			
those highways colored in _____ on the attached 12 Foot Wide Arterial			
System Map. NOTE: The symbols on the 12 Foot Wide Arterial System Map			
indicating pilot car requirements and time restrictions are superseded by the			
information on the attached Pink Sheet. Curfew Map of Permit Condition #25			
apply at all times.			
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED			
When required by the attached Pink Sheet, moves			
authorized by this permit shall be accompanied by a			
pilot car.			
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE: <input type="checkbox"/> EXEMPT \$ <b>70.00</b>		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.	
AUTHORIZED AGENT SIGNATURE _____		DATE <u>   </u> / <u>   </u> / <u>   </u>	
<b>ATTACHMENTS</b> <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> 12 Ft. Wide <input type="checkbox"/> Arterial System <input type="checkbox"/> Map <input checked="" type="checkbox"/> Pink Sheet			

# **APPENDIX 2C PARK TRAILER COACH**

## **TRANSPORTATION PERMIT** CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____		<b>PERMIT VALID BETWEEN</b> Sunrise <u>  </u> / <u>  </u> / <u>  </u> PM AND SUNSET <u>  </u> / <u>  </u> / <u>  </u> MOVING AUTHORIZED YES NO SATURDAY <input type="checkbox"/> <input checked="" type="checkbox"/> SUNDAY <input type="checkbox"/> <input checked="" type="checkbox"/> SUNSET TO SUNRISE <input type="checkbox"/> <input checked="" type="checkbox"/>																																									
HCD. OR DMV License NO. Required		2c Park Trailer Coach AUTHORIZED STATE REPRESENTATIVE _____																																									
<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input checked="" type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. A "Park Trailer Coach" as defined in Section 799.24 (f) of the Civil Code on non-expandable frame--Maximum Width--12'0", Maximum Length--40'0" TYPE VEHICLE Legal, with dual rear wheels and an unladen weight as defined in Sec 660 CVC of not less than 6,500 lbs.																																									
KING PIN TO LAST AXLE Variable		COMB. VEHICLE LENGTH Legal per Sec 35401 CVC																																									
SENDING STATION N/A		RECEIVING STATION N/A																																									
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED																																											
MAX HEIGHT: 14'0"		MAX WIDTH: 12'0"																																									
MAX OVERALL LENGTH: Legal		MAX OVERHANG: Legal																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">AXLE NUMBER</td> <td style="width:10%;">1</td> <td style="width:10%;">2</td> <td style="width:10%;">3</td> <td style="width:10%;">4</td> <td style="width:10%;">5</td> <td style="width:10%;">6</td> <td style="width:10%;">7</td> <td style="width:10%;">8</td> <td style="width:10%;">9</td> </tr> <tr> <td>NUMBER TIRES</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>AXLE SPACING</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>AXLE WIDTH</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>				AXLE NUMBER	1	2	3	4	5	6	7	8	9	NUMBER TIRES										AXLE SPACING										AXLE WIDTH									
AXLE NUMBER	1	2	3	4	5	6	7	8	9																																		
NUMBER TIRES																																											
AXLE SPACING																																											
AXLE WIDTH																																											
WEIGHT Power Unit--Legal Towed Unit--6,000 lbs./axle																																											
ORIGIN N/A		DESTINATION N/A																																									
AUTHORIZED STATE HIGHWAYS		COUNTY AND/OR CITY PERMITS REQUIRED.																																									
Except for the prohibitions listed on the attached Pink Sheet, moves authorized by this permit may travel on State Highways and overcrossings of those highways colored in _____ on the attached 12 Foot Wide Arterial System Map. NOTE: The symbols on the 12 Foot Wide Arterial System Map indicating pilot car requirements and time restrictions are superseded by the information on the attached Pink Sheet. Curfew Map of Permit Condition #25 apply at all times																																											
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED		ATTACHMENTS																																									
When required by the attached Pink Sheet, moves authorized by this permit shall be accompanied by a pilot car.		PERMIT CONDITIONS <input checked="" type="checkbox"/> 12 Ft. Wide <input type="checkbox"/> Arterial System <input type="checkbox"/> Map <input checked="" type="checkbox"/> Pink Sheet <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____																																									
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE <input type="checkbox"/> EXEMPT \$ 70.00		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME. _____ AUTHORIZED AGENT SIGNATURE _____ DATE <u>  </u> / <u>  </u> / <u>  </u>																																									

# **APPENDIX 2D** **STATE WIDE EXTRALEGAL** **12'0" WIDE-OTHERWISE LEGAL**

## **TRANSPORTATION PERMIT** **CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. <u>N/A</u>		<b>PERMIT VALID BETWEEN</b> Sunrise <u>  /  /  </u> PM AND SUNSET <u>  /  /  </u> MOVING AUTHORIZED YES NO SATURDAY ** <input checked="" type="checkbox"/> <input type="checkbox"/> SUNDAY <input checked="" type="checkbox"/> <input type="checkbox"/> SUNSET TO SUNRISE <input checked="" type="checkbox"/> <input type="checkbox"/>	
<input checked="" type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. <u>An extralegal load as defined in Section 320.5</u> <u>of the California Vehicle Code</u> TYPE VEHICLE <u>Any Legal Vehicle or Legal Combination</u>	
KING PIN TO LAST AXLE <u>40'0" Max.</u>		COMB. VEHICLE LENGTH <u>Legal per Sec. 35401 CVC</u>	
SENDING STATION <u>N/A</u>		RECEIVING STATION <u>N/A</u>	
<b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b>			
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>12'0"</u>	
MAX OVERALL LENGTH: <u>Legal</u>		MAX OVERHANG: <u>Legal</u>	
AXLE NUMBER	1	2	3
NUMBER TIRES			
AXLE SPACING			
AXLE WIDTH			
WEIGHT	<u>Legal</u>		
ORIGIN	<u>N/A</u>		
DESTINATION	<u>N/A</u>		
AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED.			TRIPS <u>Unlimited</u>
Moves authorized by this permit may travel on the State Highways and over- crossings of those highways colored in _____ on the attached 12 Foot Wide Arterial System Map.			
NOTE: The symbols on the 12 Foot Wide Arterial System Map indicating pilot car requirements and time restrictions are superseded by the information on the attached Orange Sheet. Curfew Map of Permit Condition #25 apply at all times.			
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED When required by the attached Orange Sheet, moves authorized <input checked="" type="checkbox"/> by this permit shall be accompanied by a pilot car **When a pilot car is required, moving is not authorized on Saturday or Sunday or between Sunset and Sunrise			
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE: <input type="checkbox"/> EXEMPT \$ <u>70.00</u>		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME. _____ AUTHORIZED AGENT SIGNATURE DATE	
<b>ATTACHMENTS</b> PERMIT CONDITIONS <input checked="" type="checkbox"/> Orange Sheet <input checked="" type="checkbox"/> 12 Ft. Wide <input type="checkbox"/> Arterial System <input type="checkbox"/> Map			



# **APPENDIX 2E LOCAL EXTRALEGAL 12'0" WIDE-OTHERWISE LEGAL**

## **TRANSPORTATION PERMIT CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____		PERMIT VALID BETWEEN Sunrise <u>   </u> / <u>   </u> / <u>   </u> PM <u>   </u> / <u>   </u> / <u>   </u> AND SUNSET <u>   </u> / <u>   </u> / <u>   </u> MOVING AUTHORIZED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		2e  Local Extralegal 12'0" Wide Otherwise Legal	
ADDRESS _____		SATURDAY <input checked="" type="checkbox"/> SUNDAY ** <input checked="" type="checkbox"/>		AUTHORIZED STATE REPRESENTATIVE _____	
CITY/STATE _____		SUNSET TO SUNRISE <input type="checkbox"/> <input checked="" type="checkbox"/>			
PHONE _____		HCD. NO. N/A			
<input checked="" type="checkbox"/> HAUL	LOAD OR EQUIPMENT AND MODEL NO. An extralegal load as defined in Section 320.5				TELECOPIED PERMITS NOT VALID WITHOUT SEAL.  N/A
<input type="checkbox"/> DRIVE	of the California Vehicle Code.				
<input type="checkbox"/> TOW					
TYPE VEHICLE Any Legal Vehicle or Legal Combination					
KING PIN TO LAST AXLE 40'0" Max		COMB. VEHICLE LENGTH Legal per Sec.35401 CVC		SENDING STATION N/A	RECEIVING STATION N/A
<b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b>					
MAX HEIGHT: Legal		MAX WIDTH: 12'0"		MAX OVERHANG: Legal	
AXLE NUMBER		2	3	5	6
NUMBER TIRES					
AXLE SPACING					
AXLE WIDTH					
WEIGHT	Legal				
ORIGIN N/A		DESTINATION N/A		TRIPS Unlimited	
<small>AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED.</small> Except for the prohibitions listed on the attached Green Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 100-mile radius of _____ as shown on the attached map.					
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED When required by the attached Yellow Sheet, moves authorized by this permit shall be accompanied by a pilot car. ** When a pilot car is required, moving is not authorized on Saturday or Sunday					
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE: <input type="checkbox"/> EXEMPT \$ 70.00		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.  AUTHORIZED AGENT SIGNATURE _____ DATE <u>   </u> / <u>   </u> / <u>   </u>			
		ATTACHMENTS PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____			

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

DM-M-P-16 (Rev. 1-89) ORIG—Permittee

# APPENDIX 2G LOCAL EXTRALEGAL 16 WHEEL SEMITRAILER WITH 4'6" AXLE SPACING

## TRANSPORTATION PERMIT CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME		PERMIT VALID BETWEEN		2g	
ADDRESS		Sunrise <u>  /  /  </u> AM		Local Extralegal 16 Wheel Semi-Trailer w/4'6" Axle Spacing	
CITY/STATE		PM <u>  /  /  </u>			
PHONE		AND SUNSET <u>  /  /  </u>			
HCD. NO. <u>N/A</u>		MOVING AUTHORIZED			
		SATURDAY <u>  </u> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SUNDAY <u>  </u> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SUNSET TO SUNRISE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		AUTHORIZED STATE REPRESENTATIVE	
<input checked="" type="checkbox"/> HAUL	LOAD OR EQUIPMENT AND MODEL NO.				TELECOPIED PERMITS NOT VALID WITHOUT SEAL  N/A
<input type="checkbox"/> DRIVE	An extralegal load as defined in Section 320.5 of the				
<input type="checkbox"/> TOW	California Vehicle Code				
TYPE VEHICLE <u>3-axle Truck Tractor, 2-axle Semi-Trailer</u>					
KING PIN TO LAST AXLE <u>40'0" Max.</u>		COMB. VEHICLE LENGTH <u>Legal per Sec. 35401 CVC</u>		SENDING STATION <u>N/A</u>	RECEIVING STATION <u>N/A</u>
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED					
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>12'0"</u>		MAX OVERHANG: <u>Legal</u>	
AXLE NUMBER	1	2	3	4	5
NUMBER TIRES	2	4	4	8	8
AXLE SPACING	<u>13'9"</u>	<u>4'0"</u>	<u>XX</u>	<u>4'6"</u>	
AXLE WIDTH	<u>Legal</u>	<u>—</u>	<u>Legal</u>	<u>Legal 10'0"</u>	
WEIGHT	<u>12,500</u>	<u>40,000</u>	<u>46,570 @ Legal Width</u> <u>50,620 @ 10'0" Width</u>		
ORIGIN	<u>N/A</u>			DESTINATION	TRIPS
			<u>N/A</u>		<u>Unlimited</u>
AUTHORIZED STATE HIGHWAYS <u>  </u> * COUNTY AND/OR CITY PERMITS REQUIRED.					
<u>XX The gross vehicle weight must exceed 80,000 lbs before extralegal axle group weight</u>					
<u>is allowed</u>					
<u>Except for the prohibitions listed on the attached Green Sheet, moves authorized by this</u>					
<u>permit may travel on all State Highways and overcrossings of those highways within a 100-</u>					
<u>mile radius of</u> <u>                    </u> <u>as shown on the attached map.</u>					
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED					
<u>When required by the attached Yellow Sheet, moves authorized by this</u>					
<u>permit shall be accompanied by a pilot car</u>					
<u>** When a pilot car is required, moving is not authorized on</u>					
<u>Saturday or Sunday</u>					
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE <input type="checkbox"/> EXEMPT		FEE: <u>\$ 70.00</u> I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.			
AUTHORIZED AGENT SIGNATURE				DATE <u>  /  /  </u>	
			ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input type="checkbox"/> <u>                    </u> <input type="checkbox"/> <u>                    </u> <input type="checkbox"/> <u>                    </u> <input type="checkbox"/> <u>                    </u> <input type="checkbox"/> <u>                    </u>		

# **APPENDIX 2H LOCAL EXTRALEGAL 16 WHEEL SEMITRAILER WITH 5'9" AXLE SPACING**

## **TRANSPORTATION PERMIT CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. <u>N/A</u>		PERMIT VALID BETWEEN Sunrise <u>AM</u> <u>   </u> / <u>   </u> / <u>   </u> PM <u>   </u> / <u>   </u> / <u>   </u> AND SUNSET MOVING AUTHORIZED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SATURDAY <input checked="" type="checkbox"/> <input type="checkbox"/> SUNDAY <input checked="" type="checkbox"/> <input type="checkbox"/> ** SUNSET TO SUNRISE <input type="checkbox"/> <input checked="" type="checkbox"/>		2h Local Extralegal 16 Wheel Semi-Trailer w/5'9" Axle Spacing AUTHORIZED STATE REPRESENTATIVE _____					
<input checked="" type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. <u>An extralegal load as defined in Section 320.5 of the</u> <u>California Vehicle Code</u>		TELECOPIED PERMITS NOT VALID WITHOUT SEAL N/A					
TYPE VEHICLE <u>3-axle Truck Tractor, 2-axle Semi-Trailer</u>		KING PIN TO LAST AXLE <u>40'0" Max</u> COMB. VEHICLE LENGTH <u>Legal per Sec. 35401 CVC</u>		SENDING STATION <u>N/A</u> RECEIVING STATION <u>N/A</u>					
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED									
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>12'0"</u>		MAX OVERALL LENGTH: <u>Legal</u>					
MAX OVERHANG: <u>Legal</u>									
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER TIRES	2	4	4	8	8				
AXLE SPACING		13'9"	4'0"	XX	5'9"				
AXLE WIDTH	Legal	—	Legal	Legal	10'0"				
WEIGHT	12,500 - 40,000		48,000 @ Legal Width 52,000 @ 10'0" Width						
ORIGIN	<u>N/A</u>			DESTINATION <u>N/A</u>				TRIPS <u>Unlimited</u>	
AUTHORIZED STATE HIGHWAYS		* COUNTY AND/OR CITY PERMITS REQUIRED.							
XX The gross vehicle weight must exceed 80,000 lbs. before extralegal axle group weight is allowed									
Except for the prohibitions listed on the attached Green Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 100-mile radius of _____ as shown on the attached map.									
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED When required by the attached Yellow Sheet, moves authorized by this permit shall be accompanied by a pilot car ** When a pilot car is required, moving is not authorized on Saturday or Sunday									
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE <input type="checkbox"/> EXEMPT		FEE: \$ <u>70.00</u>		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.				AUTHORIZED AGENT SIGNATURE _____ DATE <u>   </u> / <u>   </u> / <u>   </u>	
ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____									

# **APPENDIX 2I FIXED WIDTH SEMITRAILER (GRANDFATHER)**

## **TRANSPORTATION PERMIT**

CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. <u>N/A</u>		PERMIT VALID BETWEEN Sunrise <u>am</u> <u>/</u> <u>/</u> <u>/</u> PM AND SUNSET <u>/</u> <u>/</u> <u>/</u> MOVING AUTHORIZED YES NO SATURDAY <input checked="" type="checkbox"/> <input type="checkbox"/> SUNDAY ** <input checked="" type="checkbox"/> <input type="checkbox"/> SUNSET TO SUNRISE <input type="checkbox"/> <input checked="" type="checkbox"/>		<div style="text-align: right;">2i</div> Fixed Width Semi-Trailer (Grandfather)  AUTHORIZED STATE REPRESENTATIVE _____																																																			
<input checked="" type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. <u>An extralegal load as defined in Section 320.5 of the</u> <u>California Vehicle Code or towed unladen wide maximum</u> VIN # _____ Trlr. Lic. # _____		TELECOPIED PERMITS NOT VALID WITHOUT SEAL  <div style="text-align: center;">N/A</div>																																																			
TYPE VEHICLE <u>3-axle Truck Tractor, 2-axle Ft. Wide Semi-Trailer</u>		KING PIN TO LAST AXLE <u>40'0" Max.</u>		COMB. VEHICLE LENGTH <u>Legal per Sec 35401 CVC</u>																																																			
SENDING STATION <u>N/A</u>		RECEIVING STATION <u>N/A</u>		LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED																																																			
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>12'0"</u>		MAX OVERALL LENGTH: <u>Legal</u>																																																			
MAX OVERHANG: <u>Legal</u>		<table border="1" style="width:100%; text-align: center;"> <tr> <td>AXLE NUMBER</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> <td>7</td> <td>8</td> <td>9</td> </tr> <tr> <td>NUMBER TIRES</td> <td>2</td> <td>4</td> <td>4</td> <td>?</td> <td>?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>AXLE SPACING</td> <td>?</td> <td>?</td> <td>?</td> <td>?</td> <td>(USE ACTUAL)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>AXLE WIDTH</td> <td>Legal</td> <td></td> <td></td> <td>?</td> <td>?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>WEIGHT</td> <td>12,500</td> <td>?</td> <td></td> <td>?</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		AXLE NUMBER	1	2	3	4	5	6	7	8	9	NUMBER TIRES	2	4	4	?	?					AXLE SPACING	?	?	?	?	(USE ACTUAL)					AXLE WIDTH	Legal			?	?					WEIGHT	12,500	?		?							
AXLE NUMBER	1	2	3	4	5	6	7	8	9																																														
NUMBER TIRES	2	4	4	?	?																																																		
AXLE SPACING	?	?	?	?	(USE ACTUAL)																																																		
AXLE WIDTH	Legal			?	?																																																		
WEIGHT	12,500	?		?																																																			
ORIGIN <u>N/A</u>		DESTINATION <u>N/A</u>		TRIPS <u>Unlimited</u>																																																			
AUTHORIZED STATE HIGHWAYS _____ * COUNTY AND/OR CITY PERMITS REQUIRED.																																																							
This permit only authorizes movement of loads that are as wide or wider than the																																																							
Semi-trailer or that exceed "Vehicle Code" legal weight																																																							
Except for the prohibitions listed on the attached Green Sheet, moves authorized by this																																																							
permit may travel on all State Highways and overcrossings of those highways within a																																																							
100-mile radius of _____ as shown on the attached map																																																							
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED																																																							
When required by the attached Yellow Sheet, moves authorized by this																																																							
permit shall be accompanied by a pilot car																																																							
** When a pilot car is required, moving is not authorized on																																																							
Saturday or Sunday																																																							
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE: <input type="checkbox"/> EXEMPT \$ <u>70.00</u>		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.  AUTHORIZED AGENT SIGNATURE _____ DATE <u>/</u> <u>/</u> <u>/</u>																																																					
ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____																																																							

# **APPENDIX 2J** **UNLADEN MULTI-VEHICLE COMBINATION** **STATE WIDE**

**TRANSPORTATION PERMIT**  
 CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____		<b>PERMIT VALID BETWEEN</b> Sunrise <u>    </u> AM <u>    </u> / <u>    </u> / <u>    </u> PM <u>    </u> / <u>    </u> / <u>    </u> AND SUNSET <u>    </u> / <u>    </u> / <u>    </u> MOVING AUTHORIZED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SATURDAY <input checked="" type="checkbox"/> <input type="checkbox"/> SUNDAY <input checked="" type="checkbox"/> <input type="checkbox"/> SUNSET TO SUNRISE <input checked="" type="checkbox"/> <input type="checkbox"/>	
HCD. NO. <u>N/A</u>		2j Unladen Multi Vehicle Combination State Wide AUTHORIZED STATE REPRESENTATIVE TELECOPIED PERMITS NOT VALID WITHOUT SEAL.	
<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input checked="" type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. <u>Unladen vehicle combination, or haul one or two vehicles</u> <u>of said combination and/or haul a pilot car</u>	
TYPE VEHICLE <u>Use Actual</u>		N/A	
KING PIN TO LAST AXLE <u>Variable</u>			
COMB. VEHICLE LENGTH <u>N/A</u>		SENDING STATION <u>N/A</u> RECEIVING STATION <u>N/A</u>	
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED			
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>10'0" Max.</u>	
MAX OVERALL LENGTH: <u>85'0" Max</u>		MAX OVERHANG: <u>Legal</u>	
AXLE NUMBER	1	2	3
NUMBER TIRES	EXPANDABLE DOLLIES AND TRAILERS SHALL BE REDUCED TO THEIR LEAST WIDTH		
AXLE SPACING	ALL OUTRIGGERS SHALL BE REMOVED		
AXLE WIDTH			
WEIGHT	ALL AXLES LEGAL—GROSS WEIGHT MAY EXCEED 80,000 LBS.		
ORIGIN	<u>N/A</u>		DESTINATION <u>N/A</u>
AUTHORIZED STATE HIGHWAYS		* COUNTY AND/OR CITY PERMITS REQUIRED.	
Except for the routes listed on the attached "Prohibited State Routes" list, moves authorized by this permit may travel on all State Highways and overcrossings of those highways			
PILOT CAR <input type="checkbox"/> YES <input checked="" type="checkbox"/> NONE REQUIRED			
ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Prohibited State Routes and Pilot Car Requirements			
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE: <input type="checkbox"/> EXEMPT \$ <u>70.00</u>		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME. AUTHORIZED AGENT SIGNATURE _____ DATE <u>    </u> / <u>    </u> / <u>    </u>	



# **APPENDIX 2K** **UNLADEN MULTI-VEHICLE COMBINATION** **100 MILE RADIUS**

## **TRANSPORTATION PERMIT** **CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. <u>N/A</u>		PERMIT VALID BETWEEN Sunrise <u>      </u> AM <u>  </u> / <u>  </u> / <u>  </u> PM <u>      </u> / <u>  </u> / <u>  </u> AND SUNSET <u>      </u> / <u>  </u> / <u>  </u> MOVING AUTHORIZED YES NO SATURDAY <input checked="" type="checkbox"/> <input type="checkbox"/> SUNDAY <input checked="" type="checkbox"/> <input type="checkbox"/> SUNSET TO SUNRISE <input checked="" type="checkbox"/> <input type="checkbox"/>		<div style="text-align: right;">2k</div> Unladen Multi-Vehicle Combination 100-mile Radius _____ AUTHORIZED STATE REPRESENTATIVE					
<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input checked="" type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. Unladen vehicle combination, or haul one or two vehicles of said combination and/or haul a pilot car		TELECOPIED PERMITS NOT VALID WITHOUT SEAL  N/A					
TYPE VEHICLE <u>Use Actual</u>		KING PIN TO LAST AXLE <u>Variable</u> COMB. VEHICLE LENGTH <u>N/A</u>		SENDING STATION <u>N/A</u> RECEIVING STATION <u>N/A</u>					
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED									
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>11'0" Max.</u>		MAX OVERALL LENGTH: <u>110'0" Max.</u>					
MAX OVERHANG: <u>Legal</u>									
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER TIRES	EXPANDABLE DOLLIES AND TRAILERS SHALL BE REDUCED TO THEIR LEAST WIDTH								
AXLE SPACING	ALL OUTRIGGERS SHALL BE REMOVED								
AXLE WIDTH	VARIABLE--NOT TO EXCEED 11'0" WIDE (USE ACTUAL)								
WEIGHT	ALL AXLES LEGAL--GROSS WEIGHT MAY EXCEED 80,000 LBS.								
ORIGIN	<u>N/A</u>				DESTINATION	<u>N/A</u>			
						TRIPS <u>Unlimited</u>			
AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED. Except for the prohibitions listed on the attached Green Sheet, moves authorized by this permit may travel on all State Highways and overcrossing of those highways within a 100-mile radius of _____ as shown on the attached map									
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED When required by the attached Yellow Sheet, moves authorized by this permit shall be accompanied by a pilot car. ** When a pilot car is required, moving is not authorized on _____ <u>Saturday, Sunday or Sunset to Sunrise</u>									
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE: \$ <u>70.00</u> <input type="checkbox"/> EXEMPT		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME. _____ AUTHORIZED AGENT SIGNATURE							
		DATE <u>      </u> / <u>      </u> / <u>      </u>							
ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____									

# **APPENDIX 2L TRUCK CRANE GREEN WEIGHT $\leq$ 10'0" WIDE 100 MILE RADIUS**

## **TRANSPORTATION PERMIT** CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. <b>N/A</b>		<b>PERMIT VALID BETWEEN</b> Sunrise <u>    </u> AM <u>    </u> / <u>    </u> / <u>    </u> PM <u>    </u> / <u>    </u> / <u>    </u> AND SUNSET <u>    </u> / <u>    </u> / <u>    </u> MOVING AUTHORIZED YES NO SATURDAY ** <input checked="" type="checkbox"/> <input type="checkbox"/> SUNDAY ** <input checked="" type="checkbox"/> <input type="checkbox"/> SUNSET TO SUNRISE <input checked="" type="checkbox"/> <input type="checkbox"/>	<div style="text-align: right;">21</div> Truck Crane Green Weight 10'0" Wide or Less 100-Mile Radius  AUTHORIZED STATE REPRESENTATIVE _____						
<input type="checkbox"/> HAUL    LOAD OR EQUIPMENT AND MODEL NO. Describe (Make, Model & Co. # _____) equipped as shown		TELECOPIED PERMITS NOT VALID WITHOUT SEAL  <div style="font-size: 2em;">N/A</div>							
<input checked="" type="checkbox"/> DRIVE    on the attached Profile Sheet and Inspection Report									
<input type="checkbox"/> TOW									
TYPE VEHICLE <u>    </u> -axle Truck Crane (Lic. # _____) with boom on <u>    </u> -axle dolly/trailer (Lic. # _____)									
KING PIN TO LAST AXLE <u>    </u> <b>N/A</b>		COMB. VEHICLE LENGTH <u>    </u> <b>Use Actual</b>							
SENDING STATION <u>    </u> <b>N/A</b>		RECEIVING STATION <u>    </u> <b>N/A</b>							
<b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b>									
MAX HEIGHT: <u>Legal</u>	MAX WIDTH: <u>Use Actual</u> 10'0" Max.	MAX OVERALL LENGTH: <u>Use Actual</u> 80'0" Max	MAX OVERHANG: <u>Use Actual from</u> Profile Sheet						
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER TIRES									
AXLE SPACING	USE ACTUAL DIMENSIONS AND PERMIT WEIGHTS FROM								
AXLE WIDTH	INSPECTION REPORT								
WEIGHT									
ORIGIN <u>    </u> <b>N/A</b>		DESTINATION <u>    </u> <b>N/A</b>				TRIPS <u>Unlimited</u>			
AUTHORIZED STATE HIGHWAYS _____ * COUNTY AND/OR CITY PERMITS REQUIRED. Except for the prohibitions listed on the attached Green Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 100-Mile radius of _____ as shown on the attached map									
PILOT CAR <input type="checkbox"/> YES <input checked="" type="checkbox"/> NONE REQUIRED						<b>ATTACHMENTS</b> <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input checked="" type="checkbox"/> Profile Sheet and <input type="checkbox"/> Inspection Report <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____			
** Daylight hours only on Saturday and Sunday									
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE <input type="checkbox"/> EXEMPT		FEE: \$ <u>70.00</u>		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME. _____ AUTHORIZED AGENT SIGNATURE					
				_____ DATE					

# **APPENDIX 2M TRUCK CRANE GREEN WEIGHT > 10'0" WIDE 100 MILE RADIUS**

TRANSPORTATION PERMIT  
CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. <b>N/A</b>		PERMIT VALID BETWEEN Sunrise <u>  </u> / <u>  </u> / <u>  </u> PM AND SUNSET <u>  </u> / <u>  </u> / <u>  </u> MOVING AUTHORIZED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SATURDAY <input checked="" type="checkbox"/> SUNDAY ** <input checked="" type="checkbox"/> SUNSET TO SUNRISE <input checked="" type="checkbox"/> 	<div style="text-align: right;">2m</div> Truck Crane Green Weight 10'0" Wide or Wider 100-Mile Radius  AUTHORIZED STATE REPRESENTATIVE  TELECOPIED PERMITS NOT VALID WITHOUT SEAL  <div style="text-align: center;">N/A</div>
<input type="checkbox"/> HAUL <input checked="" type="checkbox"/> DRIVE <input type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. Describe (Make, Model & Co.# _____) equipped as shown on the attached Profile Sheet and Inspection Report	
TYPE VEHICLE <b>-axle Truck Crane (Lic. # _____)</b> with boom on <b>-axle dolly/trailer (Lic. # _____)</b>		SENDING STATION <b>N/A</b> RECEIVING STATION <b>N/A</b>	
KING PIN TO LAST AXLE <b>N/A</b>		COMB. VEHICLE LENGTH <b>Use Actual</b>	
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED			
MAX HEIGHT: <b>Legal</b>		MAX WIDTH: <b>Use Actual 11'4" Max.</b>	
MAX OVERALL LENGTH: <b>Use Actual 80'0" Max</b>		MAX OVERHANG: <b>Use Actual from Profile Sheet</b>	
AXLE NUMBER	1	2	3
NUMBER TIRES			
AXLE SPACING		USE ACTUAL DIMENSIONS AND PERMIT WEIGHTS FROM	
AXLE WIDTH		INSPECTION REPORT	
WEIGHT			
ORIGIN <b>N/A</b>	DESTINATION <b>N/A</b>		TRIPS <b>Unlimited</b>
AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED. Except for the prohibitions on the attached Green Sheet, Moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 100-mile radius of _____ as shown on the attached map.			
** Daylight hours only on Saturday and Sunday			
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED When required by the attached Yellow Sheet, moves authorized by this permit shall be accompanied by a pilot car.			
** When a pilot car is required, moving is not authorized on Saturday, Sunday or from Sunset to Sunrise			
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE: <b>70.00</b> <input type="checkbox"/> EXEMPT \$		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.  AUTHORIZED AGENT SIGNATURE _____ DATE _____	
		ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input checked="" type="checkbox"/> Profile Sheet and <input type="checkbox"/> Inspection Report	

# **APPENDIX 2N TRUCK CRANE GREEN WEIGHT FRONT OR REAR OVERHANG > 25'0" 100 MILE RADIUS**

**TRANSPORTATION PERMIT**  
CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. <u>N/A</u>		<b>PERMIT VALID BETWEEN</b> Sunrise <u>  </u> / <u>  </u> / <u>  </u> PM AND SUNSET <u>  </u> / <u>  </u> / <u>  </u> MOVING AUTHORIZED YES NO SATURDAY <input type="checkbox"/> <input checked="" type="checkbox"/> SUNDAY <input type="checkbox"/> <input checked="" type="checkbox"/> SUNSET TO SUNRISE <input type="checkbox"/> <input checked="" type="checkbox"/>	
<input type="checkbox"/> HAUL <input checked="" type="checkbox"/> DRIVE <input type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. Describe (Make, Model & Co.# _____) equipped as shown on the attached Profile Sheet and Inspection Report TYPE VEHICLE <u>-axle Truck Crane (Lic.# _____)</u> KING PIN TO LAST AXLE <u>N/A</u> COMB. VEHICLE LENGTH <u>N/A</u> SENDING STATION <u>N/A</u> RECEIVING STATION <u>N/A</u>	
<b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b>			
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>Use Actual 11'4" Max.</u>	
MAX OVERALL LENGTH: <u>Use Actual 80'0" Max</u>		MAX OVERHANG: <u>Use Actual from Profile Sheet</u>	
AXLE NUMBER	1	2	3
NUMBER TIRES			
AXLE SPACING			
AXLE WIDTH			
WEIGHT			
ORIGIN	<u>N/A</u>	DESTINATION	<u>N/A</u>
AUTHORIZED STATE HIGHWAYS <u>N/A</u>		TRIPS <u>Unlimited</u>	
EXCEPT FOR THE PROHIBITIONS LISTED ON THE ATTACHED GREEN SHEET, MOVES AUTHORIZED BY THIS PERMIT MAY TRAVEL ON ALL STATE HIGHWAYS AND OVERCROSSINGS OF THOSE HIGHWAYS WITHIN A 100-MILE RADIUS OF _____ AS SHOWN ON THE ATTACHED MAP			
PILOT CAR <input checked="" type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED Moves authorized by this permit shall be accompanied by a pilot car		<b>ATTACHMENTS</b> <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input checked="" type="checkbox"/> Profile Sheet and <input type="checkbox"/> Inspection Report	
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE <input type="checkbox"/> EXEMPT		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME. FEE: \$ <u>70.00</u> AUTHORIZED AGENT SIGNATURE _____ DATE <u>  </u> / <u>  </u> / <u>  </u>	

# **APPENDIX 2-O TRUCK CRANE PURPLE WEIGHT ≤ 10'0" WIDE 75 MILE RADIUS**

## **TRANSPORTATION PERMIT CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. <u>N/A</u>		<b>PERMIT VALID BETWEEN</b> Sunrise <u>  /  /  </u> AM PM <u>  /  /  </u> AND SUNSET <u>  /  /  </u> MOVING AUTHORIZED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SATURDAY <input checked="" type="checkbox"/> <input type="checkbox"/> SUNDAY ** <input checked="" type="checkbox"/> <input type="checkbox"/> SUNSET TO SUNRISE <input checked="" type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> HAUL <input checked="" type="checkbox"/> DRIVE <input type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. Describe (Make, Model & Co.# _____) equipped as shown on the attached Profile Sheet and Inspection Report TYPE VEHICLE <u>-axle Truck Crand (Lic.# _____)</u> <u>with boom on -axle dolly/trailer (Lic.# _____)</u> KING PIN TO LAST AXLE <u>N/A</u> COMB. VEHICLE LENGTH <u>Use Actual</u> SENDING STATION <u>N/A</u> RECEIVING STATION <u>N/A</u>	
<b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b>			
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>Use Actual 10'0" Max.</u>	
MAX OVERALL LENGTH: <u>Use Actual 80'0" Max.</u>		MAX OVERHANG: <u>Use Actual from Profile Sheet</u>	
AXLE NUMBER	1	2	3
NUMBER TIRES			
AXLE SPACING		USE ACTUAL DIMENSIONS AND PERMIT WEIGHTS FROM _____	
AXLE WIDTH		INSPECTION REPORT _____	
WEIGHT			
ORIGIN	<u>N/A</u>	DESTINATION	<u>N/A</u>
AUTHORIZED STATE HIGHWAYS _____		* COUNTY AND/OR CITY PERMITS REQUIRED.	
Except for the prohibitions listed on the attached Blue Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 75-mile radius of _____ as shown on the attached map			
PILOT CAR <input type="checkbox"/> YES <input checked="" type="checkbox"/> NONE REQUIRED			
** Daylight hours only on Saturday and Sunday			
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE FEE: <input type="checkbox"/> EXEMPT \$ <u>70.00</u>		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME. _____ AUTHORIZED AGENT SIGNATURE DATE	
		<b>ATTACHMENTS</b> <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Blue Sheet <input checked="" type="checkbox"/> Profile Sheet and Inspection Report <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

# **APPENDIX 2P TRUCK CRANE PURPLE WEIGHT > 10'0" WIDE 75 MILE RADIUS**

**TRANSPORTATION PERMIT**  
CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____		PERMIT VALID BETWEEN Sunrise <u>      </u> / <u>      </u> / <u>      </u> PM <u>      </u> / <u>      </u> / <u>      </u> AND SUNSET <u>      </u> / <u>      </u> / <u>      </u> MOVING AUTHORIZED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		2p  Truck Crane Purple Weight 10'0" Wide or Wider 75-Mile Radius  AUTHORIZED STATE REPRESENTATIVE _____  TELECOPIED PERMITS NOT VALID WITHOUT SEAL  N/A	
ADDRESS _____		SATURDAY <input checked="" type="checkbox"/> SUNDAY <input checked="" type="checkbox"/> SUNSET TO SUNRISE <input checked="" type="checkbox"/>			
CITY/STATE _____					
PHONE _____	HCD. NO. <u>N/A</u>				
<input type="checkbox"/> HAUL	LOAD OR EQUIPMENT AND MODEL NO. Describe (Make, Model & Co.# _____) equipped as shown				N/A
<input checked="" type="checkbox"/> DRIVE	on the attached Profile Sheet and Inspection Report				
<input type="checkbox"/> TOW					
TYPE VEHICLE <u>-axle Truck Crane (Lic. # _____)</u> with boom on <u>-axle dolly/trailer (Lic. # _____)</u>					
KING PIN TO LAST AXLE <u>N/A</u>		COMB. VEHICLE LENGTH <u>Use Actual</u>		SENDING STATION <u>N/A</u>	RECEIVING STATION <u>N/A</u>
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED					
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>Use Actual 11'4" Max.</u>		MAX OVERALL LENGTH: <u>Use Actual 80'0" Max</u>	
				MAX OVERHUNG: <u>Use Actual from Profile Sheet</u>	
AXLE NUMBER		2	3	4	5
NUMBER TIRES					
AXLE SPACING		USE ACTUAL DIMENSIONS AND PERMIT WEIGHTS FROM			
AXLE WIDTH		INSPECTION REPORT			
WEIGHT					
ORIGIN <u>N/A</u>			DESTINATION <u>N/A</u>		TRIPS <u>Unlimited</u>
AUTHORIZED STATE HIGHWAYS _____ * COUNTY AND/OR CITY PERMITS REQUIRED. Except for the prohibitions listed on the attached Blue Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 75-mile radius of _____ as shown on the attached map  ** Daylight hours only on Saturday and Sunday					
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED When required by the attached Yellow Sheet, moves authorized by this permit shall be accompanied by a pilot car  ** When a pilot car is required, moving is not authorized on _____ _____ _____					
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE <input type="checkbox"/> EXEMPT			I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.  AUTHORIZED AGENT SIGNATURE _____ DATE _____		
FEE: <u>70.00</u>			ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Blue Sheet <input checked="" type="checkbox"/> Profile Sheet and <input type="checkbox"/> Inspection Report		



**TRANSPORTATION PERMIT**  
**CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:					PERMIT VALID BETWEEN		2q	
NAME _____			Sunrise <u>AM</u> <u>   /    /   </u> PM <u>   /    /   </u>			Truck Crane Purple Weight Front or Rear Overhang 25'0" or More 75-Mile Radius  AUTHORIZED STATE REPRESENTATIVE _____		
ADDRESS _____			AND SUNSET _____ MOVING AUTHORIZED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
CITY/STATE _____			SATURDAY <input type="checkbox"/> <input checked="" type="checkbox"/> SUNDAY <input type="checkbox"/> <input checked="" type="checkbox"/>					
PHONE _____		HCD. NO. N/A	SUNSET TO SUNRISE <input type="checkbox"/> <input checked="" type="checkbox"/>					
<input type="checkbox"/> HAUL	LOAD OR EQUIPMENT AND MODEL NO. Describe (Make, Model & Co.# ) equipped as shown						TELECOPIED PERMITS NOT VALID WITHOUT SEAL  N/A	
<input checked="" type="checkbox"/> DRIVE	on the attached Profile Sheet and Inspection Report							
<input type="checkbox"/> TOW								
TYPE VEHICLE	-axle Truck Crand (Lic.# )							
KING PIN TO LAST AXLE N/A			COMB. VEHICLE LENGTH N/A			SENDING STATION N/A		RECEIVING STATION N/A
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED								
MAX HEIGHT: Legal		MAX WIDTH: Use Actual 11'4" Max		MAX OVERALL LENGTH: Use Actual 80'0" Max		MAX OVERHANG: Use Actual from Profile Sheet		
AXLE NUMBER	1	2	3	4	5	6	7	8
NUMBER TIRES								
AXLE SPACING								
USE ACTUAL DIMENSIONS AND PERMIT WEIGHTS FROM INSPECTION REPORT								
AXLE WIDTH								
WEIGHT								
ORIGIN N/A				DESTINATION N/A				TRIPS Unlimited
AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED. Except for the prohibitions listed on the attached Blue Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 75-mile radius of as shown on the attached map								
PILOT CAR <input checked="" type="checkbox"/> YES <input type="checkbox"/> NONE REQUIRED Moves authorized by this permit shall be accompanied by a pilot car								
I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.								
AUTHORIZED AGENT SIGNATURE _____ DATE ____/____/____								
ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Yellow Sheet <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Blue Sheet <input checked="" type="checkbox"/> Profile Sheet and Inspection Report <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____								
CASH <input type="checkbox"/> CHARGE <input type="checkbox"/> FEE: \$ 70.00 EXEMPT <input type="checkbox"/>								

# **APPENDIX 2R** **FIXED LOAD - DRIVEN** **GREEN WEIGHT** **100 MILE RADIUS**

**TRANSPORTATION PERMIT**  
**CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. _____		<b>PERMIT VALID BETWEEN</b> Sunrise <sup>AM</sup> / / PM AND SUNSET / / MOVING AUTHORIZED SATURDAY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO SUNDAY ** <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO SUNSET TO SUNRISE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<div align="right">2r</div> Fixed Load-Driven Green Weight 100-Mile Radius  AUTHORIZED STATE REPRESENTATIVE _____ TELECOPIED PERMITS NOT VALID WITHOUT SEAL.	
<input type="checkbox"/> HAUL <input checked="" type="checkbox"/> DRIVE <input type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. <u>Describe Vehicle including restrictions and equipment</u>  TYPE VEHICLE <u>"Say What It Is"</u>		KING PIN TO LAST AXLE <u>N/A</u> COMB. VEHICLE LENGTH <u>N/A</u> SENDING STATION <u>N/A</u> RECEIVING STATION <u>N/A</u>	
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED					
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>Use Actual 10'0" Max</u>		MAX OVERALL LENGTH: <u>Legal</u>	
MAX OVERHANG: <u>25' Front</u> <u>30' Rear</u>					
AXLE NUMBER	1	2	3	4	5
NUMBER TIRES					
AXLE SPACING					
USE ACTUAL DIMENSIONS AND PERMIT WEIGHTS FROM					
AXLE WIDTH					
INSPECTION REPORT					
WEIGHT					
ORIGIN	<u>N/A</u>			DESTINATION	<u>N/A</u>
			TRIPS	<u>Unlimited</u>	
AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED. Except for the prohibitions listed on the attached Green Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 100-mile radius of _____ as shown on the attached map					
PILOT CAR <input type="checkbox"/> YES <input checked="" type="checkbox"/> NONE REQUIRED					
** Daylight hours only on Saturday and Sunday					
I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.					
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE <input type="checkbox"/> EXEMPT		FEE: \$ <u>70.00</u> AUTHORIZED AGENT SIGNATURE _____ DATE / /			
<b>ATTACHMENTS</b> <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Green Sheet <input checked="" type="checkbox"/> Inspection Report <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____					

# **APPENDIX 2S FIXED LOAD - TOWED GREEN WEIGHT 100 MILE RADIUS**

## **TRANSPORTATION PERMIT**

CALIFORNIA DEPARTMENT OF TRANSPORTATION

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

<p>NAME _____</p> <p>ADDRESS _____</p> <p>CITY/STATE _____</p> <p>PHONE _____ HCD. NO. _____</p>		<p align="center"><b>PERMIT VALID BETWEEN</b></p> <p>Sunrise <u>  </u> <u>  </u> <u>  </u> AM PM <u>  </u> <u>  </u> <u>  </u></p> <p>AND SUNSET <u>  </u> <u>  </u> <u>  </u></p> <p>MOVING AUTHORIZED YES NO</p> <p>SATURDAY ** <input checked="" type="checkbox"/> <input type="checkbox"/></p> <p>SUNDAY <input checked="" type="checkbox"/> <input type="checkbox"/></p> <p>SUNSET TO SUNRISE <input checked="" type="checkbox"/> <input type="checkbox"/></p>		<p align="right">2s</p> <p>Fixed Load-Towed Green Weight 100-mile Radius</p> <p>_____ AUTHORIZED STATE REPRESENTATIVE</p> <p>TELECOPIED PERMITS NOT VALID WITHOUT SEAL</p> <p align="center">N/A</p>					
<p><input type="checkbox"/> HAUL    LOAD OR EQUIPMENT AND MODEL NO. _____</p> <p><input type="checkbox"/> DRIVE    Describe Vehicle including restrictions and equipment _____</p> <p><input checked="" type="checkbox"/> TOW      carried as shown on the attached Inspection Report _____</p>		<p>TYPE VEHICLE</p> <p align="center">"Say What It Is"</p>							
<p>KING PIN TO LAST AXLE    40'0" Max</p> <p>COMB. VEHICLE LENGTH    Legal per Sec. 35401 CVC</p>									
<p><b>LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED</b></p>									
<p>MAX HEIGHT: Legal</p>		<p>MAX WIDTH: Use Actual 10'0" Max</p>		<p>MAX OVERALL LENGTH: Legal</p>					
<p>MAX OVERHANG: Legal</p>									
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER TIRES									
AXLE SPACING									
<p>USE ACTUAL DIMENSIONS AND PERMIT WEIGHTS FROM</p>									
AXLE WIDTH									
<p>INSPECTION REPORT</p>									
WEIGHT									
ORIGIN					DESTINATION			TRIPS	
N/A					N/A			Unlimited	
<p>AUTHORIZED STATE HIGHWAYS    * COUNTY AND/OR CITY PERMITS REQUIRED.</p> <p>Except for the prohibitions listed on the attached Green Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 100-mile radius of _____ as shown on the attached map</p>									
<p>PILOT CAR <input type="checkbox"/> YES    <input checked="" type="checkbox"/> NONE REQUIRED</p>									
<p>** Daylight hours only on Saturday and Sunday</p>									
<p><input type="checkbox"/> CASH    <input type="checkbox"/> CHARGE    FEE: \$ 70.00    <input type="checkbox"/> EXEMPT</p>									
<p>I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.</p>									
<p>_____ AUTHORIZED AGENT SIGNATURE</p>					<p>_____ DATE</p>				
<p align="center"><b>ATTACHMENTS</b></p> <p><input checked="" type="checkbox"/> PERMIT CONDITIONS</p> <p><input checked="" type="checkbox"/> Radius Map</p> <p><input checked="" type="checkbox"/> Green Sheet</p> <p><input checked="" type="checkbox"/> Inspection Report</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>									

**TRANSPORTATION PERMIT**  
**CALIFORNIA DEPARTMENT OF TRANSPORTATION**

COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:					2t		
NAME			PERMIT VALID BETWEEN Sunrise AM    / / PM         / / AND SUNSET MOVING AUTHORIZED		<b>Fixed Load-Driven Purple Weight 75-Mile Radius</b>  AUTHORIZED STATE REPRESENTATIVE _____  TELECOPIED PERMITS NOT VALID WITHOUT SEAL		
ADDRESS			SATURDAY      YES NO *K* □ SUNDAY       ** K □ SUNSET TO SUNRISE K □				
CITY/STATE							
PHONE		HCD. NO.    N/A					
<input type="checkbox"/> HAUL    LOAD OR EQUIPMENT AND MODEL NO. Describe Vehicle including restrictions and equipment							
<input checked="" type="checkbox"/> DRIVE    carried as shown on the attached Inspection Report							
<input type="checkbox"/> TOW							
TYPE VEHICLE							
<b>"Say What It Is"</b>							
KING PIN TO LAST AXLE    N/A			COMB. VEHICLE LENGTH    N/A		SENDING STATION    N/A		
RECEIVING STATION    N/A							
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED							
MAX HEIGHT: Legal		MAX WIDTH: Use Actual 10'0" Max		MAX OVERALL LENGTH: Legal		MAX OVERHANG: 25' Front 30' Rear	
AXLE NUMBER	1	2	3	4	5	6	7
NUMBER TIRES							
AXLE SPACING							
USE ACTUAL DIMENSIONS AND PERMIT WEIGHTS FROM							
AXLE WIDTH							
INSPECTION REPORT							
WEIGHT							
ORIGIN    N/A				DESTINATION    N/A		TRIPS    Unlimited	
AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED.							
Except for the prohibitions listed on the attached Blue Sheet, moves authorized by this permit may travel on all State Highways and overcrossings of those highways within a 75-mile radius of _____ as shown on the attached map							
PILOT CAR <input type="checkbox"/> YES <input checked="" type="checkbox"/> NONE REQUIRED				<b>ATTACHMENTS</b> <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Blue Sheet <input checked="" type="checkbox"/> Inspection Report <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
** Daylight hours only on Saturday and Sunday							
<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE <input type="checkbox"/> EXEMPT		FEE: \$ 70.00		I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.			
AUTHORIZED AGENT SIGNATURE				DATE			

# **APPENDIX 2U** **FIXED LOAD - TOWED** **PURPLE WEIGHT** **75 MILE RADIOUS**

**TRANSPORTATION PERMIT**  
**CALIFORNIA DEPARTMENT OF TRANSPORTATION**

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL OF THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND THE ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

NAME _____ ADDRESS _____ CITY/STATE _____ PHONE _____ HCD. NO. _____		PERMIT VALID BETWEEN Sunrise <u>  /  /  </u> PM AND SUNSET <u>  /  /  </u> MOVING AUTHORIZED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> SATURDAY <input checked="" type="checkbox"/> SUNDAY <input checked="" type="checkbox"/> ** SUNSET TO SUNRISE <input checked="" type="checkbox"/>		<div align="right">2u</div> Fixed Load-Towed Purple Weight 75-Mile Radius  AUTHORIZED STATE REPRESENTATIVE _____ TELECOPIED PERMITS NOT VALID WITHOUT SEAL  N/A	
<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input checked="" type="checkbox"/> TOW		LOAD OR EQUIPMENT AND MODEL NO. <u>Describe Vehicle including restrictions and equipment</u> <u>carried as shown on the attached Inspection Report</u> TYPE VEHICLE <u>"Say What It Is"</u>		KING PIN TO LAST AXLE <u>40'0" Max</u> COMB. VEHICLE LENGTH <u>Legal per Sec-35401 CVC</u> SENDING STATION <u>N/A</u> RECEIVING STATION <u>N/A</u>	
LOADED DIMENSIONS DIFFERENT THAN OR WEIGHTS EXCEEDING THOSE SHOWN BELOW ARE NOT AUTHORIZED					
MAX HEIGHT: <u>Legal</u>		MAX WIDTH: <u>Use Actual 10'0" Max</u>		MAX OVERALL LENGTH: <u>Legal</u>	
MAX OVERHANG: <u>Legal</u>					
AXLE NUMBER	1	2	3	4	5
NUMBER TIRES					
AXLE SPACING					
USE ACTUAL DIMENSIONS AND PERMIT WEIGHT FROM					
AXLE WIDTH					
INSPECTION REPORT					
WEIGHT					
ORIGIN	<u>N/A</u>			DESTINATION	<u>N/A</u>
			TRIPS <u>Unlimited</u>		
AUTHORIZED STATE HIGHWAYS * COUNTY AND/OR CITY PERMITS REQUIRED. <u>Except for the prohibitions listed on the attached Blue Sheet, moves authorized by this</u> <u>permit may travel on all State Highways and overcrossings of those highways within a</u> <u>75-mile radius of</u> <u>as shown on the attached map</u>					
PILOT CAR <input type="checkbox"/> YES <input checked="" type="checkbox"/> NONE REQUIRED  <u>** Daylight hours only on Saturday and Sunday</u>					
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> CASH  <input type="checkbox"/> CHARGE  <input type="checkbox"/> EXEMPT           </div> <div>             FEE: \$ <u>70.00</u>              I CERTIFY THAT ALL COUNTY AND/OR CITY TRANSPORTATION PERMITS HAVE BEEN OBTAINED IF THIS PERMIT IS FOR TOWING A MOBILEHOME.              AUTHORIZED AGENT SIGNATURE _____ DATE <u>  /  /  </u> </div> </div>					
ATTACHMENTS <input checked="" type="checkbox"/> PERMIT CONDITIONS <input checked="" type="checkbox"/> Radius Map <input checked="" type="checkbox"/> Blue Sheet <input checked="" type="checkbox"/> Inspection Report <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____					





